



PTO/SB/21 (09-04)
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TRANSMITTAL FORM    Filing Date   October 16, 2003	Under the Paper	work Reduction Act of 1995	no persons		ollection of in	formation	unless it	displays a valid OMB control number.	
FIRST Named Inventor  At Unit  Attorney Docket Number  Braquel Yverte Gordon  Attorney Docket Number  Atter Allowance Communication to TC  Appeal Communication to TC  Appeals and Interferences  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC  Appeals and Interferences  Appeal Communication to TC  (Appeals and Interferences  Board Communication to TC  (Appeals and Interferences  Status Letter  Charlied Copy of Priority  Document(s)  Beautiful Priority  Conversion And Interferences  After Allowance Communication to TC  (Appeals and Interferences  Interferences  Appeal Communication to TC  (Appeals and Interferences  Interferences  Status Letter  Charlied Copy of Priority  Document(s)  Interferences  Conmunication to TC  (Appeal Communication to				Application Number	10/685,50	0			
Art Unit 2853 Examiner Name Requel Yveite Gordon Attorney Docket Number 27180US    Fee Transmittal Form				Filing Date	October 1				
Examiner Name Requel Yvete Gordon  Attorney Docket Number   Requel Yvete Gordon    Attorney Docket Number   ZF180US      Fee Transmittal Form				First Named Inventor	Kia Silvert				
Total Number of Pages in This Submission  ENCLOSURES (Check all that apply)  ENCLOSURES (Check all that apply)  ENCLOSURES (Check all that apply)  Fee Transmittal Form				Art Unit	2853				
Total Number of Pages in This Submission	40 ha		60\	Examiner Name	Raquel Yv	Raquel Yvette Gordon			
ENCLOSURES (Check all that apply)    Fee Transmittal Form			nung)	Attorney Docket Number	7E190US				
Fee Transmittal Form    Fee Attached	Total Number of Pa	ages in This Submission	•		ZF 10003				
Fee Attached			ENCL	OSURES (Check al	l that apply	1)			
Amendment/Reply	ree mansing			<b>3</b> ( )			Appea of App	al Communication to Board leals and Interferences	
Signature  Printed name  Kia Silverbrook  Date  November 11, 2004  Reg. No.  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature	After Final After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts  Reply to Missing Parts			Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Ferminal Disclaimer Request for Refund CD, Number of CD(s)  Landscape Table on Cl (s)  a.silverbrook@silverbrookre le: 61-2-9818-6633	Address		Propri Status Other	al Notice, Brief, Reply Brief) etary Information : Letter Enclosure(s) (please Identify	
Printed name Kia Silverbrook Date November 11, 2004  Reg. No.  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature		SIGNA	TURE O	F APPLICANT, ATTO	RNEY, C	R AGE	ENT		
Printed name  Kia Silverbrook  Date  November 11, 2004  Reg. No.  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:  Signature		1							
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type)

Kia Silverbrook

PTO/SB/17 (10-04)
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CCC TO AND	CRAITTAL	Complete if Known				
FEE TRAN	SIMILI I AL	Application Number	10/685,500			
for FY	2005	Filing Date	October 16, 2003 Kia Silverbrook Raquel Yvette Gordon 2853			
Effective 10/01/2004. Patent fees are		First Named Inventor				
		Examiner Name				
Applicant claims small entity status	s. See 37 CFR 1.27	Art Unit				
TOTAL AMOUNT OF PAYMENT	(\$) 110.00	Attorney Docket No.	ZE180US			

Attorney Docket No.   ZE180US							
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit card Money Other None	3. ADDITIONAL FEES						
Deposit Account:	Large Entity   Small Entity						
Deposit Account.	Fee	Fee		Fee	Fee Description		
Account	1051	( <b>\$</b> ) 130	<b>Code</b> 2051	(\$) 65	Surcharge - late filing fee or oath	Fee Paid	
Number Deposit	1052	50	2052		Surcharge - late ming ree or cath  Surcharge - late provisional filing fee or		
Account Name	1032	50	2002	25	cover sheet	H	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification	<del></del>	
Charge fee(s) indicated below Credit any overpayments	1812		1812		For filing a request for ex parte reexamination	-	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
	1251	110	2251	55	Extension for reply within first month	110.00	
FEE CALCULATION	1252	430	2252	215	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	1253	980	2253	490	Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254	1,530	2254	765	Extension for reply within fourth month		
Code (\$) Code (\$) 1001 790 2001 395 Utility filing fee	1255	2.080	2255		Extension for reply within fifth month		
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of Appeal	1	
1003 550 2003 275 Plant filing fee	1402	340	2402		Filing a brief in support of an appeal		
1004 790 2004 395 Reissue filing fee	1403	00	2403		Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451		1451		Petition to institute a public use proceeding		
	1452	110	2452		Petition to revive - unavoidable		
SUBTOTAL (1) (\$)	1453		2453		Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501		2501		Utility issue fee (or reissue)		
Fee from  Ext <u>ra Claims below Fee Paid</u>	1502	4 0	2502		Design issue fee		
Total Claims = X =	1503	6 0	2503	3 0	Plant issue fee		
Independent - 3** = X = X	1460	130	1460	130	Petitions to the Commissioner		
Multiple Dependent	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)		
Large Entity   Small Entity	1806	180	1806		Submission of Information Disclosure Stmt		
Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	8021	40	8021	I 40	Recording each patent assignment per		
1202 18 2202 9 Claims in excess of 20	1809	790	2809		property (times number of properties) Filing a submission after final rejection		
1201 88 2201 44 Independent claims in excess of 3					(37 ČFR 1.129(a))	<u> </u>	
1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))		
1204 88 2204 44 ** Reissue independent claims over original patent	1801	790	2801	395	Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802		Request for expedited examination		
and over original patent	<b></b>	·			of a design application		
SUBTOTAL (2) (\$)		Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110.00							
SUBMITTED BY (Complete (if applicable))							
Name (Print/Type) Kia Silverbrook	F	Registra	tion No.	.	Telephone +6129818663*	3	

Date November 11, 2004 Signature WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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(Attomev/Agent)